



King County Mental Health Chemical Abuse and Dependency Services Division 2002 Briefing Paper

CHANGING THE AGE OF CONSENT FOR YOUTH

BACKGROUND:

The age of consent for reproductive health, mental health and substance abuse treatment in the State of Washington is 13. The State Legislature considered, but did not pass, a bill to change the age of consent to 16 during the 2002 session. King County and a number of other government and non-governmental agencies have been invited to participate in the study of this issue prior to the next legislative session. Family advocates and treatment professionals have varying perspectives on this issue. Some express frustration at not being able to force youth into mental health and chemical dependency treatment. Others feel that forced treatment for many youth may be ineffective or even make matters worse.

ISSUES/CHALLENGES:

- The issue of age of consent is part of the larger issue of child rights. This area of law has been regarded with great ambivalence due to the apparent conflicts with the principles of the sanctity and privacy of the family. The challenge is to reconcile these two opposing principles.
- Children without rights to consent to care have been subject to ineffective or harmful care in other states. The National Alliance for the Mentally Ill has documented abuses of restraints in facilities treating youth without consent.
- Parents have great power to influence their youth in issues regarding mental health and substance abuse through skilled use of contingencies and, for youth at risk of harm or causing harm, due to mental illness or use of substances, through exercising involuntary treatment, At Risk Youth/Children in Need of Services court petitions, etc.
- Youth, on average, can make reasoned decisions regarding health issues as well as adults. Many youth and adults are, however, impaired in making such decisions.
- Effective treatment with youth demands an alliance in the context of a trusting relationship with a counselor or therapist. Washington State law currently creates a favorable climate for this.
- Good treatment management of youth who are out of control and in opposition to family and community is to rebuild their alliance with parents, or parent substitute if parents are unavailable.
- Treatment is more effective when conducted in the context of a youth's community in the least restrictive setting. Community based care has been a core principle of services to youth for many years.
- The principles of System of Care Reform offer a more effective treatment and parent support alternative to forced care. This includes empowering families to wisely exercise options.

RECOMMENDATION/LEGISLATIVE ACTION:

Make no changes to the age of consent. Seek improved training, resources and parent support for youth with serious emotional disorders and their families. Look to the System of Care Reform movement in our state for cost effective models of care that emphasize family empowerment, strength based approaches, and community based care as a preferable option to forced treatment.